## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M06000007026

Entity Name: CNL RESORT JUNIOR MREP, LLC

**FILED** Apr 23, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

420 S ORANGE AVE, STE 700 1 POST OFFICE SQUARE ORLANDO, FL 32801

STE 3100

BOSTON, MA 02109

**Current Mailing Address: New Mailing Address:** 

1 POST OFFICE SQUARE PO BOX 2226 ORLANDO, FL 32802

STE 3100 BOSTON, MA 02109

FEI Number: 01-0879697 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

THOMAS, STEPHANIE J WRIGHT, DANIEL 420 S ORANGE AVE, STE 700 1 POST OFFICE SQUARE STE 3100 ORLANDO, FL 32801

BOSTON, FL 02109 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DANIEL WRIGHT 04/23/2008

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete (X) Change ( ) Addition

BLOOM, BARRY A.N. WRIGHT, DANIEL Name: Name: 420 S ORANGE AVE, STE 700 Address: 1 POST OFFICE SQUARE STE 3100 Address:

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: BOSTON, MA 02109

( ) Delete Title: MGR Title: (X) Change ( ) Addition GRISWOLD, JOHN A Name: BUZA, JOHN Name:

Address: 420 S ORANGE AVE. STE 700 Address: 1 POST OFFICE SQUARE STE 3100

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: BOSTON, MA 02109

Title: MGR () Delete Title: (X) Change ( ) Addition STRICKLAND, C BRIAN QUINN, MICHAEL Name: Name:

420 S ORANGE AVE, STE 700 1 POST OFFICE SQUARE STE 3100 Address: Address:

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: BOSTON, MA 02109

(X) Change ( ) Addition Title: MGR ( ) Delete Title: Name: FREDLINGTON, JOHN L Name: FOSTER, MICHAEL

1 POST OFFICE SQUARE STE 3100 Address: 445 BROAD HOLLOW RD, STE 239 Address:

City-St-Zip: MELVILLE, NY 11747 City-St-Zip: BOSTON, MA 02109

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL WRIGHT 04/23/2008